

AUTO CR - LOG SUMMARY #1073274

TYPE: INFO

Incident Finding / Overall Case Finding

| Description of Incident | Finding | Entered By | Entered Date |
|---|----------------|------------|--------------|
| It is reported that officers stopped the subject because he was driving a stolen vehicle. The subject fled from the vehicle and the officers chased him. Officer Smith deployed his Taser during the foot chase, causing the subject to fall to the ground. The subject tensed and flailed his arms to prevent the officers from handcuffing him, but they were able to gain control of him and place him into custody. | (None Entered) | | |

Reporting Party Information

| Role | Name | Star No. | Emp No. | UOA / UOD | Position | Sex | Race | Address | Phone |
|--------------|-----------------------------|----------|---------|-----------|--------------------|-----|------|---------|-------|
| CPD Employee | Reporting Party Third Party | 895 | | 006 / 212 | SERGEANT OF POLICE | M | WHI | | |

Incident Information

| Incident From Date/Time | Address of Incident | Beat | Dist. Of Occurrence | Location Code | Location Description |
|---------------------------------------|---------------------|------|---------------------|---------------|----------------------|
| 07-JAN-2015 07:47 - 07-JAN-2015 07:47 | | 0712 | 007 | 304 - STREET | |

Accused Members

| Role | Name | Star No. | Emp No. | UOA / UOD | Position | Status | Initial / Intake Allegation |
|------|------|----------|---------|-----------|----------|--------|-----------------------------|
|------|------|----------|---------|-----------|----------|--------|-----------------------------|

Other Involved Parties

| Role | Name | Star No. | Emp No. | UOA / UOD | Position | Sex | Race | Address | Phone |
|--------------|-----------------|----------------|---------|-----------|----------------|-----|------|---------|-------|
| NON-CPD | Victim/Subject | | | | | M | BLK | | |
| CPD Employee | Involved Member | SMITH, TERRY H | 20836 | 007 / 212 | POLICE OFFICER | M | WHI | | |
| CPD Employee | Witness | SPAIN, PETER N | 5434 | 007 / 212 | POLICE OFFICER | M | S | | |

Involved Party Associations

| Role | Rep. Party Name | Related Person | Relationship |
|------|-----------------|----------------|--------------|
|------|-----------------|----------------|--------------|

Incident Details

| | | | |
|--------------------------------|------|------------------------------|-----|
| CR Required? | | Manner Incident Received? | PAX |
| Confidential? | | Biased Language? | N |
| Extraordinary Occurrence? | N | Bias Based Profiling? | N |
| Police Shooting (U)? | N | Alcohol Related? | N |
| Non Disciplinary Intervention: | N | Pursuit Related? | N |
| Initial Assignment: | IPRA | Violence in Workplace? | N |
| Notify IAD Immediately? | N | Domestic Violence? | N |
| EEO Complaint No.: | | | |
| Civil Suit No.: | | Civil Suit Settled Date: | |
| Notify Chief Administrator? | N | Notify Chief? | |
| Notify Coordinator? | | Notification Does Not Apply? | Y |
| Notification Other? | N | | |
| Notification Comments: | | | |

Incident Category List

| Incident Category | Primary? | Initial? |
|--|----------|----------|
| 20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE | Y | Y |

Investigator History

| Investigator | Type | Assigned Team | Assigned Date | Scheduled End Date | Investigation End Date | No. of Days |
|--------------|------|---------------|---------------|--------------------|------------------------|-------------|
|--------------|------|---------------|---------------|--------------------|------------------------|-------------|

Extension History

| Name | Previous Scheduled End Date | Extended Scheduled End Date | Date Certified Letter Sent | Reason Selected | Explanation | Extension Report Date | Approved By | Approved Date | Approval Comments |
|------|-----------------------------|-----------------------------|----------------------------|-----------------|-------------|-----------------------|-------------|---------------|-------------------|
|------|-----------------------------|-----------------------------|----------------------------|-----------------|-------------|-----------------------|-------------|---------------|-------------------|

Current Allegations

| Accused Name | Seq. No. | Allegation | Category | Subcategory | Finding |
|--------------|----------|------------|----------|-------------|---------|
|--------------|----------|------------|----------|-------------|---------|

Situations (Allegation Details)

| Accused Name | Alleg. No. | Situation | Victim/Offender Armed? | Weapon Types | Weapon Other | Weapon Recovered? | Deceased? |
|--------------|------------|-----------|------------------------|--------------|--------------|-------------------|-----------|
|--------------|------------|-----------|------------------------|--------------|--------------|-------------------|-----------|

Status History

| Resulting Status | Status Date/Time | Created By | Position | UOA / UOD | Comments |
|---------------------------|-------------------|-----------------|----------------------------|-----------|--|
| ADMINISTRATIVELY CLOSED | 28-JAN-2015 11:01 | WEEDEN, WILLIAM | DEPUTY CHIEF ADMINISTRATOR | 113 / | |
| CLOSED AT C.O.P.A. | 28-JAN-2015 11:01 | WEEDEN, WILLIAM | DEPUTY CHIEF ADMINISTRATOR | 113 / | |
| PENDING ASSIGN TEAM | 23-JAN-2015 07:58 | OLVERA, MARIA | SUPERVISING INV COPA | 113 / | |
| PENDING SUPERVISOR REVIEW | 23-JAN-2015 07:21 | HAYES, SHANNON | INVESTIGATOR 2 COPA | 113 / | |
| PRELIMINARY | 21-JAN-2015 09:41 | HAYES, SHANNON | INVESTIGATOR 2 COPA | 113 / | Emailed Lt. Betz for Taser download. |
| PRELIMINARY | 16-JAN-2015 08:54 | HAYES, SHANNON | INVESTIGATOR 2 COPA | 113 / | |
| PRELIMINARY | 16-JAN-2015 08:50 | HAYES, SHANNON | INVESTIGATOR 2 COPA | 113 / | Emailed Sgt. Walsh for Taser download. |
| PRELIMINARY | 08-JAN-2015 08:43 | HAYES, SHANNON | INVESTIGATOR 2 COPA | 113 / | Needs Taser download. |
| PRELIMINARY | 08-JAN-2015 01:14 | CHIBE, JOHN | POLICE OFFICER | 116 / | |

Attachments

| No. | Type | Related Person | No. of Pages | Narrative | Original in File | Entered By | Entered Date/Time | Status | Approve Content | Approve Inclusion |
|-----|-----------------------------|----------------|--------------|----------------------------------|------------------|----------------|-------------------|----------|-----------------|-------------------|
| 1 | FACE SHEET | | | | | CHIBE, JOHN | 08-JAN-2015 01:14 | | | |
| | DOCUMENTS - INTAKE INCIDENT | | 5 | | N | HAYES, SHANNON | 08-JAN-2015 08:42 | APPROVED | | |
| | DOCUMENTS - INTAKE INCIDENT | | 2 | PO Terry Smith | N | HAYES, SHANNON | 08-JAN-2015 08:41 | APPROVED | | |
| | DOCUMENTS - INTAKE INCIDENT | | 2 | PO Peter Spain | N | HAYES, SHANNON | 08-JAN-2015 08:42 | APPROVED | | |
| | DOCUMENTS - INTAKE INCIDENT | | 2 | Motor Vehicle Theft - Automobile | N | HAYES, SHANNON | 16-JAN-2015 08:53 | APPROVED | | |
| | DOCUMENTS - INTAKE INCIDENT | | 2 | | N | HAYES, SHANNON | 23-JAN-2015 07:21 | APPROVED | | |

Review Incident

| Review Type | Accused/Involved Member Name | Result Type | Reviewed By | Position | Unit | Review Date | Remarks |
|-------------|------------------------------|-------------|-------------|----------|------|-------------|---------|
|-------------|------------------------------|-------------|-------------|----------|------|-------------|---------|

Review Accused

| Review Type | Accused/Involved Member Name | Result Type | Reviewed By | Position | Unit | Review Date | Remarks |
|-------------|------------------------------|-------------|-------------|----------|------|-------------|---------|
|-------------|------------------------------|-------------|-------------|----------|------|-------------|---------|

Review Accused

Accused Finding History

| Accused | Allegation | Reviewed By | Reviewed Date/Time | CCR? | Concur? | Finding | Finding Comments |
|---------|------------|-------------|--------------------|------|---------|---------|------------------|
|---------|------------|-------------|--------------------|------|---------|---------|------------------|

Accused Penalty History

| Accused | Reviewed By | Reviewed Date/Time | CCR? | Concur? | Penalty | Penalty Comments |
|---------|-------------|--------------------|------|---------|---------|------------------|
|---------|-------------|--------------------|------|---------|---------|------------------|

Findings

| Accused Name | Allegations | Category | Concur? | Findings | Comments |
|--------------|-------------|----------|---------|----------|----------|
|--------------|-------------|----------|---------|----------|----------|

FACE SHEET (Notification Date: 08-JAN-2015) - LOG #1073274

TYPE: INFO

Reporting Party Information

| | Role | Name | Star No. | Emp No. | UOA / UOD | Position | Sex | Race | Address | Phone |
|--------------|-----------------------------|------|----------|---------|-----------|--------------------|-----|------|---------|-------|
| CPD Employee | Reporting Party Third Party | | 895 | | 006 / 212 | SERGEANT OF POLICE | M | WHI | | |

Incident Information

| Incident From Date/Time | Address of Incident | Beat | Dist. Of Occurrence | Location Code | Location Description |
|---------------------------------------|---------------------|------|---------------------|---------------|----------------------|
| 07-JAN-2015 07:47 - 07-JAN-2015 07:47 | | 0712 | 007 | 304 - STREET | |

Accused Members

| Role | Name | Star No. | Emp No. | UOA / UOD | Position | Status | Initial / Intake Allegation |
|------|------|----------|---------|-----------|----------|--------|-----------------------------|
|------|------|----------|---------|-----------|----------|--------|-----------------------------|

Incident Details

| | | | |
|--------------------------------|------|------------------------------|-----|
| CR Required? | | Manner Incident Received? | PAX |
| Confidential? | | Biased Language? | N |
| Extraordinary Occurrence? | N | Bias Based Profiling? | N |
| Police Shooting (U)? | N | | |
| Motor Vehicle (V)? | | Alcohol Related? | N |
| Non Disciplinary Intervention: | N | Pursuit Related? | N |
| Initial Assignment: | IPRA | Violence in Workplace? | N |
| Notify IAD Immediately? | N | Domestic Violence? | N |
| EEO Complaint No.: | | | |
| Civil Suit No.: | | Notify Chief? | |
| Notify Chief Administrator? | N | Notification Does Not Apply? | Y |
| Notify Coordinator? | | | |
| Notification Other? | N | | |

Initial Incident Category List

| Initial Incident Category | Primary? |
|--|----------|
| 20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE | Y |

Assignment History

| Assigned To | Assigned Team | Investigator | Assignment Date/Time | Assigned By | Reason |
|-------------|--|--------------|----------------------|-------------|--------|
| IPRA | CIVILIAN OFFICE OF POLICE ACCOUNTABILITY | - | 08-JAN-2015 01:14 | CHIBE, JOHN | |

Status History

| Resulting Status | Status Date/Time | Created By | Position | UOA / UOD | Comments |
|---------------------------|-------------------|-----------------|----------------------------|-----------|--|
| ADMINISTRATIVELY CLOSED | 28-JAN-2015 11:01 | WEEDEN, WILLIAM | DEPUTY CHIEF ADMINISTRATOR | 113 / | |
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Status History

| Resulting Status | Status Date/Time | Created By | Position | UOA / UOD | Comments |
|------------------|----------------------|-------------|----------------|-----------|----------|
| PRELIMINARY | 08-JAN-2015 01 14 | CHIBE, JOHN | POLICE OFFICER | 116 / | |

TACTICAL RESPONSE REPORT/Chicago Police Department

| | | | | | | | | | | |
|--|--|---|---|--|--|---|---|--|--|---------------------|
| MEMBER INVOLVED | 1 DATE OF INCIDENT 07-JAN-2015 | TIME 19:47:00 | 2 ADDRESS OF OCCURRENCE [REDACTED] | | 3 LOCATION CODE 303 | 4 BEAT/OCCUR 0712 | | | | |
| | 5 POSITION 9161 | 6 LAST NAME [REDACTED] | 7 FIRST NAME [REDACTED] | 8 STAR NO 5387 | 9 SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F | 10 RACE CODE WHI | 11 AGE [REDACTED] | 12 HT 602 | 13 WT 210 | |
| | 14 DATE OF APPT 31-JUL-2006 | 15 EMPLOYEE NO [REDACTED] | 16 UNIT & BEAT OF ASSIGNMENT 007 4214E | | 17 DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off | 18 MEMBER INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No | 19 MEMBER IN UNIFORM? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No | | | |
| SUBJECT INFORMATION | 20 LAST NAME [REDACTED] | | 21 FIRST NAME [REDACTED] | | 22 M I D | 23 SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F | 24 RACE BLK | 25 D O B [REDACTED] | 26 HT 506 | 27 WT 140 |
| | 28 ADDRESS [REDACTED] | | 29 TELEPHONE NO [REDACTED] | | 30 WAS SUBJECT ARMED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No | | 31 SUBJECT INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No | | 32 SUBJECT ALLEGED INJURY? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No | |
| | 33 WHERE WAS MEDICAL TREATMENT OBTAINED? | | | 34 BY WHOM? | | 35 CONDITION <input type="checkbox"/> 03 Hospitalized <input checked="" type="checkbox"/> 04 Not Hospitalized <input checked="" type="checkbox"/> 05 Refused Medical Aid | | | | |
| 36 CHARGES PLACED 520 ILCS 5.0/1.22, 625 ILCS 5.0/4-103-A-1 | | | | | | | | | | |
| REASON FOR USE OF FORCE (Check all that apply) | PASSIVE RESISTER | | ACTIVE RESISTER | | ASSAILANT ASSAULT | | ASSAILANT BATTERY | | ASSAILANT DEADLY FORCE | |
| | DID NOT FOLLOW VERBAL DIRECTION <input checked="" type="checkbox"/> STIFFENED (DEAD WEIGHT) <input type="checkbox"/> OTHER _____ | | FLED <input checked="" type="checkbox"/> PULLED AWAY <input type="checkbox"/> OTHER _____ | | IMMINENT THREAT OF BATTERY <input type="checkbox"/> OTHER _____ | | ATTACK WITH WEAPON <input type="checkbox"/> ATTACK WITHOUT WEAPON <input type="checkbox"/> OTHER _____ | | USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM <input type="checkbox"/> WEAPON <input type="checkbox"/> OTHER _____ | |
| | MEMBER PRESENCE <input checked="" type="checkbox"/> VERBAL COMMANDS <input checked="" type="checkbox"/> ESCORT HOLDS <input type="checkbox"/> WRISTLOCK <input type="checkbox"/> ARMBAR <input type="checkbox"/> PRESSURE SENSITIVE AREAS <input type="checkbox"/> CONTROL INSTRUMENT <input type="checkbox"/> OC/CHEMICAL WEAPON W/AUTHORIZATION <input type="checkbox"/> OTHER _____ | | OPEN HAND STRIKE <input type="checkbox"/> TAKE DOWN / EMERGENCY HANDCUFFING <input type="checkbox"/> OC CHEMICAL WEAPON <input type="checkbox"/> CANINE <input type="checkbox"/> TASER (Probe Discharge) <input checked="" type="checkbox"/> TASER (Contact Stun) <input type="checkbox"/> TASER (Laser Targeted) <input type="checkbox"/> TASER (Spark Displayed) <input type="checkbox"/> OTHER _____ | | ELBOW STRIKE <input type="checkbox"/> CLOSED HAND STRIKE/PUNCH <input type="checkbox"/> IMPACT WEAPON (Describe in Box 40) <input type="checkbox"/> OTHER _____ | | KNEE STRIKE <input type="checkbox"/> KICKS <input type="checkbox"/> IMPACT MUNITION (Describe in Box 40) <input type="checkbox"/> | | FIREARM <input type="checkbox"/> OTHER _____ | |
| WEAPON DISCHARGE INCIDENT | 39 * OC/CHEMICAL WEAPON AUTHORIZED BY (NAME) | | | | 40 ADDITIONAL INFORMATION | | | | | |
| | POSITION | | STAR NO | | UNIT | | | | | |
| | 41 WEAPON TYPE <input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN <input type="checkbox"/> 04 SEMI-AUTO PISTOL <input type="checkbox"/> 05 CHEMICAL WEAPON <input checked="" type="checkbox"/> 06 TASER (Probe Discharge) <input type="checkbox"/> 07 OTHER | | 42 INCIDENT OCCURRED <input type="checkbox"/> Indoors <input checked="" type="checkbox"/> Outdoors | | 43 LIGHTING CONDITIONS <input type="checkbox"/> 01 Daylight <input type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input checked="" type="checkbox"/> 05 Poor Artificial <input checked="" type="checkbox"/> 06 Good Artificial | | 44 WEATHER CONDITIONS SNOW | | | |
| 45 MAKE/MANUFACTURER | | 46 MODEL | | 47 BARREL LENGTH | | 48 CALIBER/GAUGE | | | | |
| 49 TASER DART ID NO 062004WTO | | 50 WEAPON SERIAL No (Include Letters) ZZX3005TC | | 51 CHICAGO GUN REG NO | | 52 IL FIREARM OWNER ID NO | | 53 HANDGUN CERTIFICATE NO | | |
| 54 SPECIAL WEAPON CERTIFICATE NO | | 55 PROPERTY INVENTORY NO | | 56 TYPE OF AMMUNITION USED | | 57 NO OF WEAPONS DISCHARGED BY THIS MEMBER 1 | | 58 TOTAL NO OF SHOTS MEMBER FIRED | | |
| 59 WHO FIRED FIRST SHOT <input checked="" type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER <input type="checkbox"/> 03 OTHER (SPECIFY) | | 60 WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO | | 61 NO OF CARTRIDGES/ SHOT SHELLS RELOADED | | 62 HOW WAS MEMBER'S HANDGUN WORN <input type="checkbox"/> 01 RT SIDE (WAIST) <input type="checkbox"/> 02 LT SIDE (WAIST) <input type="checkbox"/> 03 OTHER (Specify) | | | | |
| 63 HOW WAS MEMBER'S HANDGUN DRAWN <input type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW <input type="checkbox"/> 03 OTHER (Specify) | | 64 SPECIFY METHOD/EQUIPMENT USED TO RELOAD | | | | 65 DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO | | | | |
| 66 DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC) | | | | 67 DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0 - 05 FT <input type="checkbox"/> 02 05 - 10 FT <input type="checkbox"/> 03 10 - 15 FT <input type="checkbox"/> 04 OVER 15 FT | | | | | | |
| 68 PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN | | | | 69 POSITION OF MEMBER DISCHARGING WEAPON <input type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY) | | | | | | |
| CASE INFO. | 72 NOTIFICATIONS (OC OR TASER INCIDENT) <input checked="" type="checkbox"/> OEMC <input checked="" type="checkbox"/> DSS & LT /DIST OF OCCUR <input checked="" type="checkbox"/> CPIC NOTIFICATIONS (FIREARM INCIDENT) <input type="checkbox"/> OEMC <input type="checkbox"/> DSS/DIST OF OCCUR & OCIC <input type="checkbox"/> CPIC <input type="checkbox"/> DET DIV Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report | | | | | | | | | |
| | 73 REPORTING MEMBER (Print Name) SMITH, TERRY H 07-JAN-2015 23:54:32 | | | | | | | | | |
| SIGNATURES | STAR/EMPLOYEE NO 5387 102199 | | SIGNATURE [REDACTED] | | | | | | | |
| | Reviewing supervisor will ensure the legibility and completeness of this report and attest by entering the required information below | | | | | | | | | |
| 74 REVIEWING SUPERVISOR (Print Name) WALSH, JAMES E | | STAR NO 895 | | SIGNATURE [REDACTED] | | | | DATE REVIEWED 08-JAN-2015 00:02:32 | | TIME |

CPD-11.3.77 (REV. 10/07)

CPD 0094948

LIEUTENANT OR ABOVE/OCIC REVIEW

THE ON-CALL INCIDENT COMMANDER (OCIC) WILL COMPLETE THE REVIEW SECTION FOR 1) ALL INCIDENTS INVOLVING THE DISCHARGE OF A FIREARM BY A DEPARTMENT MEMBER, 2) ALL INCIDENTS INVOLVING THE SERIOUS INJURY OR DEATH OF A MEMBER OF THE PUBLIC SUBSEQUENT TO INTERACTIONS WITH A DEPARTMENT MEMBER, 3) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 OR 2

THE ASSIGNED INVESTIGATING SUPERVISOR THE RANK OF LIEUTENANT OR ABOVE FROM THE DISTRICT OF OCCURRENCE WILL COMPLETE THE REVIEW SECTION FOR ALL OTHER INCIDENTS

75 SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

☐ DNA

☐ REFUSED

☐ UNABLE TO INTERVIEW (Specify Reason)

R/LT spoke with the offender in the processing area of the 007th District lock-up. The offender understood why he was arrested and had no complaints.

76 LIEUTENANT OR ABOVE/OCIC RATIONALE FOR BOX 77 FINDING

CL# [REDACTED] obtained per department policy. Based upon the information available at this time, the actions of Officer Smith are in compliance with the procedures and directives of the Chicago Police Department.

77 LIEUTENANT OR ABOVE/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION

☒ I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES

☐ I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED

LOG NO /CRNO 1073274 OBTAINED

78 LIEUTENANT OR ABOVE/OCIC (Print Name)

BETZ, DAVID C

SIGNATURE

[REDACTED]

DATE COMPLETED

TIME

08-JAN-2015 02:31:04

79 DISTRIBUTION OF ORIGINAL TRR

A TRR PACKET, INCLUDING THE TRR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE INDEPENDENT POLICE REVIEW AUTHORITY

ATTACHMENTS - PHOTOCOPIES OF

☐ SUPPLEMENTARY REPORT

☐ I O D REPORT

80 TOTAL TRR's THIS EVENT No

☐ CASE REPORT

☐ OFFICER BATTERY REPORT

☐ CR INITIATION REPORT

2

☐ ARREST REPORT

☐ TO-FROM-SUBJECT REPORTS FROM DEPARTMENT WITNESS(ES)

TACTICAL RESPONSE REPORT/Chicago Police Department

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|--|--|--|--|---|---|-----------------------------------|--|--|---|--|----------------------|--|---------------------|--|---------------------|------------------------|--|---------------------------------------|--|--|--|--|--|
| MEMBER INVOLVED | 1 DATE OF INCIDENT 07-JAN-2015 | | TIME 19:47:00 | | 2 ADDRESS OF OCCURRENCE [REDACTED] | | | | 3 LOCATION CODE 303 | | 4 BEAT/OCCUR 0712 | | | | | | | | | | | | | | |
| | 5 POSITION 9161 | | 6 LAST NAME SPAIN | | 7 FIRST NAME PETER N | | 8 STAR NO 5434 | | 9 SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F | | 10 RACE CODE S | | 11 AGE [REDACTED] | | 12 HT 510 | | 13 WT 167 | | | | | | | | |
| | 14 DATE OF APPT 29-OCT-2007 | | 15 EMPLOYEE NO [REDACTED] | | 16 UNIT & BEAT OF ASSIGNMENT 007 4214E | | 17 DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off | | 18 MEMBER INJURED? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No | | 19 MEMBER IN UNIFORM? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No | | | | | | | | | | | | | | |
| SUBJECT INFORMATION | 20 LAST NAME [REDACTED] | | 21 FIRST NAME [REDACTED] | | 22 M I D | | 23 SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F | | 24 RACE BLK | | 25 D O B [REDACTED] | | 26 HT 506 | | 27 WT 140 | | | | | | | | | | |
| | 28 ADDRESS [REDACTED] | | 29 TELEPHONE NO [REDACTED] | | 30 WAS SUBJECT ARMED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No | | | | 31 SUBJECT INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No | | 32 SUBJECT ALLEGED INJURY? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No | | | | | | | | | | | | | | |
| | 33 WHERE WAS MEDICAL TREATMENT OBTAINED? | | | | 34 BY WHOM? | | 35 CONDITION <input checked="" type="checkbox"/> 01 Apparently Normal <input type="checkbox"/> 02 Under Influence <input type="checkbox"/> 03 Hospitalized <input checked="" type="checkbox"/> 04 Not Hospitalized <input checked="" type="checkbox"/> 05 Refused Medical Aid | | | | | | | | | | | | | | | | | | |
| 36 CHARGES PLACED 520 ILCS 5.0/1.22, 625 ILCS 5.0/4-103-A-1 | | | | | | | | | | | | | | | | | | 37 CB NO [REDACTED] | | IR NO <input type="checkbox"/> DNA | | | | | |
| REASON FOR USE OF FORCE (Check all that apply) | PASSIVE RESISTER | | ACTIVE RESISTER | | ASSAILANT ASSAULT | | ASSAILANT BATTERY | | ASSAILANT DEADLY FORCE | | | | | | | | | | | | | | | | |
| | DID NOT FOLLOW VERBAL DIRECTION <input checked="" type="checkbox"/> | | FLED <input checked="" type="checkbox"/> | | IMMINENT THREAT OF BATTERY <input type="checkbox"/> | | ATTACK WITH WEAPON <input type="checkbox"/> | | USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM <input type="checkbox"/> | | | | | | | | | | | | | | | | |
| | STIFFENED (DEAD WEIGHT) <input checked="" type="checkbox"/> | | PULLED AWAY <input checked="" type="checkbox"/> | | OTHER _____ | | ATTACK WITHOUT WEAPON <input type="checkbox"/> | | WEAPON <input type="checkbox"/> | | | | | | | | | | | | | | | | |
| MEMBER'S RESPONSE | MEMBER PRESENCE <input checked="" type="checkbox"/> | | OPEN HAND STRIKE <input checked="" type="checkbox"/> | | ELBOW STRIKE <input type="checkbox"/> | | KNEE STRIKE <input type="checkbox"/> | | FIREARM <input type="checkbox"/> | | | | | | | | | | | | | | | | |
| | VERBAL COMMANDS <input checked="" type="checkbox"/> | | TAKE DOWN / EMERGENCY HANDCUFFING <input checked="" type="checkbox"/> | | CLOSED HAND STRIKE/PUNCH <input type="checkbox"/> | | KICKS <input type="checkbox"/> | | OTHER _____ | | | | | | | | | | | | | | | | |
| | ESCORT HOLDS <input type="checkbox"/> | | OC CHEMICAL WEAPON <input type="checkbox"/> | | IMPACT WEAPON (Describe in Box 40) <input type="checkbox"/> | | IMPACT MUNITION (Describe in Box 40) <input type="checkbox"/> | | | | | | | | | | | | | | | | | | |
| WEAPON DISCHARGE INCIDENT | * OC/CHEMICAL WEAPON AUTHORIZED BY (NAME) | | | | 40 ADDITIONAL INFORMATION MEMBER WAS NOT INJURED AS A RESULT OF THE PERFORMANCE OF THE TRR. MEMBER WAS INJURED AFTER BEING STRUCK BY A VEHICLE DURING THE COURSE OF THE TRR. | | | | | | | | | | | | | | | | | | | | |
| | POSITION | | STAR NO | | UNIT | | | | | | | | | | | | | | | | | | | | |
| | 41 WEAPON TYPE <input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN | | 44 SEMI-AUTO PISTOL <input type="checkbox"/> 05 CHEMICAL WEAPON <input type="checkbox"/> 06 TASER (Probe Discharge) <input type="checkbox"/> 07 OTHER | | 42 INCIDENT OCCURRED <input type="checkbox"/> Indoors <input checked="" type="checkbox"/> Outdoors | | 43 LIGHTING CONDITIONS <input type="checkbox"/> 01 Daylight <input type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input checked="" type="checkbox"/> 05 Poor Artificial <input checked="" type="checkbox"/> 06 Good Artificial | | 44 WEATHER CONDITIONS SNOW | | | | | | | | | | | | | | | | |
| 45 MAKE/MANUFACTURER | | 46 MODEL | | 47 BARREL LENGTH | | 48 CALIBER/GAUGE | | | | | | | | | | | | | | | | | | | |
| 49 TASER DART ID NO | | 50 WEAPON SERIAL No (Include Letters) | | 51 CHICAGO GUN REG NO | | 52 IL FIREARM OWNER ID NO | | 53 HANDGUN CERTIFICATE NO | | | | | | | | | | | | | | | | | |
| 54 SPECIAL WEAPON CERTIFICATE NO | | 55 PROPERTY INVENTORY NO | | 56 TYPE OF AMMUNITION USED | | 57 NO OF WEAPONS DISCHARGED BY THIS MEMBER | | 58 TOTAL NO OF SHOTS MEMBER FIRED | | | | | | | | | | | | | | | | | |
| 59 WHO FIRED FIRST SHOT <input type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER <input type="checkbox"/> 03 OTHER (SPECIFY) | | 60 WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO | | 61 NO OF CATDRIDGES/ SHOT SHELLS RELOADED | | 62 HOW WAS MEMBER'S HANDGUN WORN <input type="checkbox"/> 01 RT SIDE (WAIST) <input type="checkbox"/> 02 LT SIDE (WAIST) <input type="checkbox"/> 03 OTHER (Specify) | | | | | | | | | | | | | | | | | | | |
| 63 HOW WAS MEMBER'S HANDGUN DRAWN <input type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW <input type="checkbox"/> 03 OTHER (Specify) | | 64 SPECIFY METHOD/EQUIPMENT USED TO RELOAD | | 65 DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO | | | | | | | | | | | | | | | | | | | | | |
| 66 DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC) | | 67 DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0 - 05 FT <input type="checkbox"/> 02 05 - 10 FT <input type="checkbox"/> 03 10 - 15 FT <input type="checkbox"/> 04 OVER 15 FT | | | | | | | | | | | | | | | | | | | | | | | |
| 68 PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN | | 69 POSITION OF MEMBER DISCHARGING WEAPON <input type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY) | | | | | | | | | | | | | | | | | | | | | | | |
| CASE INFO. | 72 NOTIFICATIONS (OC OR TASER INCIDENT) <input type="checkbox"/> OEMC <input type="checkbox"/> DSS & LT /DIST OF OCCUR <input type="checkbox"/> CPIC | | NOTIFICATIONS (FIREARM INCIDENT) <input type="checkbox"/> OEMC <input type="checkbox"/> DSS/DIST OF OCCUR & OCIC <input type="checkbox"/> CPIC <input type="checkbox"/> DET DIV | | Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report | | | | | | | | | | | | | | | | | | | | |
| | 73 REPORTING MEMBER (Print Name) SPAIN, PETER N | | STAR/EMPLOYEE NO 5434 | | SIGNATURE [REDACTED] | | | | | | | | | | | | | | | | | | | | |
| SIGNATURES | 08-JAN-2015 00:28:22 | | | | | | | | | | | | | | | | | | | | | | | | |
| | Reviewing supervisor will ensure the legibility and completeness of this report and attest by entering the required information below | | | | | | | | | | | | | | | | | | | | | | | | |
| 74 REVIEWING SUPERVISOR (Print Name) WALSH, JAMES E | | STAR NO 895 | | SIGNATURE [REDACTED] | | DATE REVIEWED 08-JAN-2015 00:34:11 | | TIME | | | | | | | | | | | | | | | | | |
| CPD-11.37 (REV. 10/07) | | | | | | | | | | | | | | | | | | | | | | | | | |

LIEUTENANT OR ABOVE/OCIC REVIEW

THE ON-CALL INCIDENT COMMANDER (OCIC) WILL COMPLETE THE REVIEW SECTION FOR 1) ALL INCIDENTS INVOLVING THE DISCHARGE OF A FIREARM BY A DEPARTMENT MEMBER, 2) ALL INCIDENTS INVOLVING THE SERIOUS INJURY OR DEATH OF A MEMBER OF THE PUBLIC SUBSEQUENT TO INTERACTIONS WITH A DEPARTMENT MEMBER, 3) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 OR 2

THE ASSIGNED INVESTIGATING SUPERVISOR THE RANK OF LIEUTENANT OR ABOVE FROM THE DISTRICT OF OCCURRENCE WILL COMPLETE THE REVIEW SECTION FOR ALL OTHER INCIDENTS

75 SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

☐ DNA

☐ REFUSED

☐ UNABLE TO INTERVIEW (Specify Reason)

R/LT spoke with the offender in the processing area of the 007th District lock-up The offender understood why has was arrested and had no complaints

76 LIEUTENANT OR ABOVE/OCIC RATIONALE FOR BOX 77 FINDING

Based upon the information available at this time, the actions of Officer Spain are in compliance with the procedures and directives of the Chicago Police Department

77 LIEUTENANT OR ABOVE/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION

☒ I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES

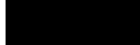
☐ I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED

LOG NO /CRNO _____ OBTAINED

78 LIEUTENANT OR ABOVE/OCIC (Print Name)

BETZ, DAVID C

SIGNATURE



DATE COMPLETED

TIME

08-JAN-2015 02:31:47

79 DISTRIBUTION OF ORIGINAL TRR

A TRR PACKET, INCLUDING THE TRR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE INDEPENDENT POLICE REVIEW AUTHORITY

ATTACHMENTS - PHOTOCOPIES OF

☐ SUPPLEMENTARY REPORT

☐ I O D REPORT

80 TOTAL TRR's THIS EVENT No

☐ CASE REPORT

☐ OFFICER BATTERY REPORT

☐ CR INITIATION REPORT

2

☐ ARREST REPORT

☐ TO-FROM-SUBJECT REPORTS FROM DEPARTMENT WITNESS(ES)

ARREST REPORT

3510 S. Michigan Avenue, Chicago, Illinois 60653

(For use by Chicago Police Department Personnel Only)

CPD-11. 420C (REV. 6/30)

CB #:
IR #:
YD #:
RD #:
EVENT #:

ARREST REPORTING

| | | | | |
|---------------------|---------------------------------------|---|--|----------------------------|
| OFFENDER | Name: [REDACTED] | Beat: 932 | Male | [REDACTED] |
| | Res: [REDACTED] | | Black 5' 07" 145 lbs Brown Eyes Black Hair Dreadlocks Hair Style Dark Brown Complexion | |
| | DOB: 14 March 1995 | | | |
| | AGE: 19 years | | | |
| | POB: Illinois | | | |
| | ARMED WITH Unarmed | | | |
| INCIDENT | Arrest Date: 07 January 2015 19:58 | TRR Completed? Yes | Total No Arrested: 4 | Co-Arrests |
| | Location: [REDACTED] | Beat: 712 | Dependent Children? No | [REDACTED] |
| | Holding Facility: District 007 Lockup | | | DCPS ward ? No |
| | Resisted Arrest? Yes | | | |
| CHARGES | 1 | Offense As Cited 625 ILCS 5.0/4-103-A-1 | | Victim |
| | | RECEIVE/POSSESS/SELL STOLEN VEHICLE | | Alamo, Sandy |
| | 2 | Offense As Cited 520 ILCS 5.0/1.22 | | State Of Illinois |
| | | RESIST/OBSTRUCT OFFICER | | |
| | | Class A - Type M | | |
| FELONY REVIEW | Felony Review : Approved | 07 JAN 2015 23:36 | Jennings, Mary | State's Attorneys's Office |
| | | | | |
| RECOVERED NARCOTICS | NO NARCOTICS RECOVERED | | | |

ARREST REPORTING

WARRANT

NO WARRANT IDENTIFIED

NON-OFFENDER(S)

VICTIM AND COMPLAINANT

Name: [REDACTED] Beat: 933 Injured? No Deceased? No
Res: [REDACTED] DOB: Hospitalized? No
Age: Treated and Released? No
Comments:

VICTIM AND COMPLAINANT

Name: STATE OF ILLINOIS Injured? No Deceased? No
Res: 11615 S Indiana Ave Beat: 532 DOB: Hospitalized? No
Chicago, IL 60628 Age: Treated and Released? No
Comments: P O Pete Spain #5434

ARRESTEE
VEHICLE

Vehicle: VEHICLE IMPOUNDED:
2001 Automobile - Dodge - Caravan - Van/Panel Or V/P VIN#: [REDACTED] IL
Trailer - Vmo Must Be Tk Lic#: [REDACTED]
Color: Blue (Top) / Blue (Bottom) Inv#: [REDACTED]
Pound#: [REDACTED]
Disposition: [REDACTED]

PROPERTIES

Confiscated Properties :

All confiscated properties are recorded in the e-Track System. This system can be queried by the inventory number to retrieve all official court documents related to evidence and/or recovered properties.

PROPERTIES INFORMATION FOR [REDACTED] NOT AVAILABLE IN THE AUTOMATED ARREST SYSTEM.

INCIDENT NARRATIVE

(The facts for probable cause to arrest AND to substantiate the charges include, but are not limited to, the following)

ABOVE ARRESTED IN THAT A/O'S CONDUCTED A LEADS INQUIRY ON THE ABOVE VEHICLE, WHICH REVEALED IT TO BE STOLEN. A/O'S ATTEMPTED TO CURB THE VEHICLE, AT WHICH TIME THE ARRESTEE (DRIVER) FLED FROM THE VEHICLE. A/O'S SPAIN, SMITH, AND O'SHEA PURSUED THE OFFENDER ON FOOT. DURING THE PURSUIT, A/O SMITH DEPLOYED A TASER, STRIKING THE ARRESTEE, CAUSING THE ARRESTEE TO FALL TO THE GROUND. A/O SPAIN AND O'SHEA THEN ATTEMPTED TO PLACE THE ARRESTEE INTO CUSTODY AT WHICH TIME THE ARRESTEE TENSED UP AND FLAILED HIS ARMS. IN RESPONSE TO THIS, A/O SPAIN PERFORMED OPEN HAND STRIKES TO THE SHOULDER AND ARMS OF THE ARRESTEE IN ORDER TO EFFECT THE ARREST. ARRESTEE THEN BECAME COMPLIANT, AND WAS PLACED INTO CUSTODY AND TRANSPORTED TO THE 007TH DISTRICT. A/O'S INSPECTED THE OFFENDER'S VEHICLE AT WHICH TIME THEY OBSERVED THE COLUMN HAD BEEN PUNCHED/PEELED. NAME CHECK CLEAR, INVESTIGATIVE ALERTS CLEAR, GIPP/TRAPP CLEAR.

ARREST REPORTING

| | | | |
|------------------------------|---|-----------------------------|--------------------------------|
| COURT INFO | Desired Court Date: 16 January 2015 Branch: 48-2 155 W 51ST ST - Room Court Sgt Handle? No Initial Court Date: 08 January 2015 Branch: CBC-1 2600 S CALIFORNIA - Room100 Docket #: | BOND INFO | BOND INFORMATION NOT AVAILABLE |
| | | | |
| REPORTING PERSONNEL | ATTESTING OFFICER: I hereby declare and affirm, under penalty of perjury, that the facts stated herein are accurate to the best of my knowledge, information and/or belief. | | |
| | Attesting Officer: [REDACTED] MONTESDEOCA, J [REDACTED] 08 JAN 2015 01 45 | | |
| | ARRESTING OFFICER(S): | | |
| | 1st Arresting Officer: [REDACTED] MONTESDEOCA, J [REDACTED] 2nd Arresting Officer: [REDACTED] MOSER, E M [REDACTED] | Beat 0743 0743 | |
| APPROVING SUPERVISOR: | Approval of Probable Cause : [REDACTED] HINDMAN, D M [REDACTED] 08 JAN 2015 02 54 | | |

ARREST PROCESSING REPORT

Holding Facility: District 007 Lockup
Received in Lockup: 08 January 2015 03 33
Prints Taken: 08 January 2015 03 23
Palprints Taken: Yes
Photograph Taken: 08 January 2015 03 43
Released from Lockup:

Time Last Fed:
Time Called: 08 January 2015 03 40 Phone#:
Cell #: 6
Transport Details : 2PO 0771 07-JAN-2015 20 00

VISUAL CHECK OF ARRESTEE

ARRESTEE QUESTIONNAIRE

Is there obvious pain or injury? No
Is there obvious signs of infection? No
Under the influence of alcohol/drugs? No
Signs of alcohol/drug withdrawal? No
Appears to be despondent? No
Appears to be irrational? No
Carrying medication? No

Presently taking medication? No
(if female)are you pregnant?
First time ever been arrested? No
Attempted suicide/serious harm? No
Serious medical or mental problems? No
Are you receiving treatment? No
Transgender/intersex/gender non-conforming? No
Deaf/hard of hearing-request interpreter for court? No
Interpreter needed? (indicate language) No

RETURN TO HOLDING FACILITY COMMENTS:

QUESTIONNAIRE REMARKS:

LOCKUP KEEPER COMMENTS:

EMERGENCY CONTACT

Name : REFUSED

Res:

Beat:

NO INTERVIEWS LOGGED

NO VISITORS LOGGED

ARREST PROCESSING REPORT

MOVEMENT LOG

MOVEMENT LOG INFORMATION NOT AVAILABLE

WC COMMENTS

Watch Commander Comments:

REL w/o CHARGING

DOES NOT APPLY TO THIS ARREST

ARRESTEE PROCESSING PERSONNEL:

PROCESSING PERSONNEL

| | | Beat |
|------------------------------|-----------------------------|-------|
| Searched By: | MOTLEY, O C | |
| Lockup Keeper: | PRICE, D J | |
| Assisting Arresting Officer: | ANDEREGG | 0752 |
| Assisting Arresting Officer: | ESTRADA, E | 0771 |
| Assisting Arresting Officer: | OCAMPO, S | 0793 |
| Assisting Arresting Officer: | GUERRERO | 0743 |
| Assisting Arresting Officer: | O SHEA, C | 0751 |
| Assisting Arresting Officer: | MARANO, N | 0793 |
| Assisting Arresting Officer: | SMITH, T H | 4214E |
| Assisting Arresting Officer: | SPAIN, P N | 4214E |
| Assisting Arresting Officer: | STRAKA, D | 0752 |
| Fingerprinted By: | RICHARDSON, J (S. 00000000) | |

APPROVAL PERSONNEL:

| | | Beat |
|-----------------------------|--------------|-------------------|
| Final Approval of Charges : | BLYSKAL, D M | 08 JAN 2015 05 06 |

CHICAGO POLICE DEPARTMENT
ORIGINAL CASE INCIDENT REPORT

3510 S. Michigan Avenue, Chicago, Illinois 60653
(For use by Chicago Police Department Personnel Only)
CPD-11.388(6/03)-C)

RD #: [REDACTED]
EVENT #: [REDACTED]

| | | | |
|----------|---|------------|---|
| INCIDENT | RE-OPENED | | |
| | IUCR: 0910 - Motor Vehicle Theft - Automobile | | |
| | Occurrence Location: [REDACTED] | Beat: 0933 | Unit Assigned: 9169 RO Arrival Date: 07 January 2015 18:25 # Offenders: 1 |
| | Occurrence Date: 07 January 2015 17:00 | | |

| | | |
|-----------------------------|---------------------------------------|----------------------|
| NON OFFENDER | VICTIM - Individual | |
| | Name: [REDACTED] | Demographics |
| | Res: [REDACTED] Beat: 0933 | Female Age: 36 Years |
| | Beat: 5100 | |
| | Sobriety: Sober | |
| | Other Communications and Availability | |
| Residence 312-972-5466 | | |
| Phone: 09:00:00 - 22:00:00 | | |
| Available Time | | |
| LAST PERSON DRIVING VEHICLE | | |
| Name: [REDACTED] | | |
| Res: [REDACTED] Beat: 0933 | | |
| Beat: 5100 | | |

| | | |
|----------|------------------------------|--------------|
| SUSPECTS | Suspect # 1 | |
| | Name: OFFENDER(S)-NO DETAILS | Demographics |

| | | |
|--------------|------------------------|--|
| RELATIONSHIP | RELATIONSHIP | |
| | (Victim) [REDACTED] | (Offender) OFFENDER(S)-NO DETAILS |

| | | |
|---------------|--|--|
| DOMESTIC INFO | | |
| | | |



| | | | | | | |
|---------|--|--|-------------|-----|-----------------|------------|
| VEHICLE | Vehicle #1 | | | | | |
| | Vehicle: 2001 Dodge - Caravan - Automobile | | Damaged? | No | Owner: | [REDACTED] |
| | Style: Vanette, (Metro, Step Van, Handy Van) | | | | Possessor/User: | [REDACTED] |
| | Color-Top/Bottom: Blue/Blue | | Theft From? | No | Towed? | No |
| | VIN#: [REDACTED] | | Burned? | No | | |
| | License Plate #: [REDACTED] - Illinois - Passenger Car | | Destroyed? | No | | |
| | Expires: 01-March-2015 | | Recovered? | No | | |
| | | | Stolen? | Yes | | |

| | | | | |
|---------------|----------------------------|--|---------------------|------|
| VEHICLE THEFT | City License: [REDACTED] | | Doors Locked? | Yes |
| | Expires: 01-March-2015 | | Ignition Locked? | No |
| | City License Verified? No | | Keys in Vehicle? | No |
| | VIN Verified? | | | |
| | | | Victim Whereabouts: | Home |
| | Insurance Company: Unknown | | | |

| | |
|-----------|--|
| NARRATIVE | EVENT [REDACTED] IN SUMMARY VICTIM WENT TO HER VEHICLE AND FOUND IT MISSING FROM WHERE SHE PARKED IT, VICTIM WOULD LIKE TO BE NOTIFIED IF FOUND. |
|-----------|--|

| | | | | | | | | |
|-----------|----------------------|---------|------------|-------------------|------------|-------------------|------|------|
| PERSONNEL | | Star No | Emp No | Name | User | Date | Unit | Beat |
| | Approving Supervisor | 2013 | [REDACTED] | YOUNG, Ray, W | [REDACTED] | 08 Jan 2015 14:17 | 376 | |
| | Reporting Officer | 10477 | [REDACTED] | CHAVEZ, Kelley, A | [REDACTED] | 07 Jan 2015 18:56 | 376 | 9169 |



EVIDENCE SYNC[™] OFFLINE

DEVICE REPORT

ECD Information

Model #: TASER_ECD_X2

Serial #: ZZX3005TC

Firmware Version: FWBundle Rev. 03.033

Device Health: Good

Offline Report

Date:

08 Jan 2015 00:21:50

Local Timezone:

Central Standard Time (UTC -6:00)

Event Log

| GMT Time | Local Time | Event | Cartridge Info | Duration | Temp | Batt% |
|---------------------|---------------------|-------|--------------------------------------|----------|--------------|------------|
| 01/02/2015 15:14:22 | 01/02/2015 09:14:22 | Armed | C1: 25' Standard C2: 25' Standard | | 22°C 22°C | 70% 70% |
| 01/02/2015 15:14:23 | 01/02/2015 09:14:23 | Arc | C1: 25' Standard C2: 25' Standard | 1s 1s | | 70% 70% |
| 01/02/2015 15:14:24 | 01/02/2015 09:14:24 | Safe | C1: 25' Standard C2: 25' Standard | 2s 2s | 22°C 22°C | 70% 70% |
| 01/02/2015 23:31:41 | 01/02/2015 17:31:41 | Armed | C1: 25' Standard C2: 25' Standard | | 25°C 25°C | 70% 70% |
| 01/02/2015 23:31:42 | 01/02/2015 17:31:42 | Safe | C1: 25' Standard C2: 25' Standard | 1s 1s | 24°C 24°C | 70% 70% |
| 01/03/2015 15:13:08 | 01/03/2015 09:13:08 | Armed | C1: 25' Standard C2: 25' Standard | | 25°C 25°C | 70% 70% |
| 01/03/2015 15:13:10 | 01/03/2015 09:13:10 | Arc | C1: 25' Standard C2: 25' Standard | 1s 1s | | 70% 70% |
| 01/03/2015 15:13:10 | 01/03/2015 09:13:10 | Safe | C1: 25' Standard C2: 25' Standard | 2s 2s | 25°C 25°C | 70% 70% |
| 01/03/2015 15:25:07 | 01/03/2015 09:25:07 | Armed | C1: 25' Standard C2: 25' Standard | | 25°C 25°C | 70% 70% |
| 01/03/2015 15:25:08 | 01/03/2015 09:25:08 | Safe | C1: 25' Standard C2: 25' Standard | 1s 1s | 25°C 25°C | 70% 70% |
| 01/03/2015 23:29:19 | 01/03/2015 17:29:19 | Armed | C1: 25' Standard C2: 25' Standard | | 23°C 23°C | 70% 70% |
| 01/03/2015 23:29:20 | 01/03/2015 17:29:20 | Safe | C1: 25' Standard C2: 25' Standard | 1s 1s | 23°C 23°C | 70% 70% |
| 01/04/2015 06:36:07 | 01/04/2015 00:36:07 | Armed | C1: 25' Standard C2: 25' Standard | | 23°C 23°C | 70% 70% |
| 01/04/2015 06:36:08 | 01/04/2015 00:36:08 | Safe | C1: 25' Standard C2: 25' Standard | 1s 1s | 23°C 23°C | 70% 70% |
| 01/04/2015 13:58:55 | 01/04/2015 07:58:55 | Armed | C1: 25' Standard C2: 25' Standard | | 21°C 21°C | 70% 70% |
| 01/04/2015 13:58:56 | 01/04/2015 07:58:56 | Arc | C1: 25' Standard C2: 25' Standard | 1s 1s | | 70% 70% |
| 01/04/2015 13:58:57 | 01/04/2015 07:58:57 | Safe | C1: 25' Standard C2: 25' Standard | 2s 2s | 21°C 21°C | 70% 70% |
| 01/05/2015 00:25:12 | 01/04/2015 18:25:12 | Armed | C1: 25' Standard C2: 25' Standard | | 21°C 21°C | 70% 70% |
| 01/05/2015 00:25:13 | 01/04/2015 18:25:13 | Safe | C1: 25' Standard C2: 25' Standard | 1s 1s | 21°C 21°C | 70% 70% |
| 01/05/2015 14:19:33 | 01/05/2015 08:19:33 | Armed | C1: 25' Standard C2: 25' Standard | | 23°C 23°C | 70% 70% |
| 01/05/2015 14:19:35 | 01/05/2015 08:19:35 | Arc | C1: 25' Standard C2: 25' Standard | 1s 1s | | 70% 70% |
| 01/05/2015 14:19:36 | 01/05/2015 08:19:36 | Safe | C1: 25' Standard C2: 25' Standard | 3s 3s | 23°C 23°C | 70% 70% |
| 01/06/2015 14:43:01 | 01/06/2015 08:43:01 | Armed | C1: 25' Standard C2: 25' Standard | | 21°C 21°C | 70% 70% |

| GMT Time | Local Time | Event | Cartridge Info | Duration | Temp | Batt% |
|---------------------|---------------------|---------------|--|----------|------|-------|
| 01/06/2015 14:43:02 | 01/06/2015 08:43:02 | Safe | C1: 25' Standard | 1s | 21°C | 70% |
| | | | C2: 25' Standard | 1s | 21°C | 70% |
| 01/06/2015 14:43:06 | 01/06/2015 08:43:06 | Armed | C1: 25' Standard | | 21°C | 70% |
| | | | C2: 25' Standard | | 21°C | 70% |
| 01/06/2015 14:43:06 | 01/06/2015 08:43:06 | Arc | C1: 25' Standard | 1s | | 70% |
| | | | C2: 25' Standard | 1s | | 70% |
| 01/06/2015 14:43:07 | 01/06/2015 08:43:07 | Safe | C1: 25' Standard | 1s | 21°C | 70% |
| | | | C2: 25' Standard | 1s | 21°C | 70% |
| 01/07/2015 23:22:30 | 01/07/2015 17:22:30 | Armed | C1: 25' Standard | | 21°C | 70% |
| | | | C2: 25' Standard | | 21°C | 70% |
| 01/07/2015 23:22:31 | 01/07/2015 17:22:31 | Safe | C1: 25' Standard | 1s | 22°C | 70% |
| | | | C2: 25' Standard | 1s | 22°C | 70% |
| 01/07/2015 23:22:32 | 01/07/2015 17:22:32 | Armed | C1: 25' Standard | | 21°C | 70% |
| | | | C2: 25' Standard | | 21°C | 70% |
| 01/07/2015 23:22:33 | 01/07/2015 17:22:33 | Safe | C1: 25' Standard | 1s | 21°C | 70% |
| | | | C2: 25' Standard | 1s | 21°C | 70% |
| 01/08/2015 01:43:26 | 01/07/2015 19:43:26 | Armed | C1: 25' Standard | | 16°C | 70% |
| | | | C2: 25' Standard | | 16°C | 70% |
| 01/08/2015 01:43:27 | 01/07/2015 19:43:27 | Trigger | C1: Deployed | 5s | | 70% |
| | | | | | | 70% |
| 01/08/2015 01:43:42 | 01/07/2015 19:43:42 | Safe | C1: Deployed | 16s | 18°C | 70% |
| | | | C2: 25' Standard | 16s | 18°C | 70% |
| 01/08/2015 06:12:42 | 01/08/2015 00:12:42 | USB Connected | C1: Invalid Cart. Type | | 24°C | 0% |
| | | | C2: Invalid Cart. Type | | 24°C | 0% |
| 01/08/2015 06:13:30 | 01/08/2015 00:13:30 | Time Sync | 01/08/2015 00:13:30 to 01/08/2015 00:16:15 | | | |
| 01/08/2015 06:21:11 | 01/08/2015 00:21:11 | Time Sync | 01/08/2015 00:21:11 to 01/08/2015 00:21:12 | | | |